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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[30Day-16-0666]

Agency Forms Undergoing Paperwork Reduction Act Review

The Centers for Disease Control and Prevention (CDC) has submitted the following information collection request to the Office of Management and Budget (OMB) for review and approval in accordance with the Paperwork Reduction Act of 1995. The notice for the proposed information collection is published to obtain comments from the public and affected agencies.

suggestions from the public Written comments and affected agencies concerning the proposed collection information are encouraged. Your comments should address any of the following: (a) Evaluate whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information will have practical utility; (b) Evaluate the accuracy of the agencies estimate of the burden of the proposed collection of information, including the validity of the methodology and assumptions used; (c) Enhance the quality, utility, and clarity of the information to be collected; (d) Minimize the burden of

the collection of information on those who are to respond, including through the use of appropriate automated, electronic, mechanical, or other technological collection techniques or other forms of information technology, e.g., permitting electronic submission of responses; and (e) Assess information collection costs.

To request additional information on the proposed project or to obtain a copy of the information collection plan and instruments, call (404) 639-7570 or send an email to omb@cdc.gov. Written comments and/or suggestions regarding the items contained in this notice should be directed to the Attention: CDC Desk Officer, Office of Management and Budget, Washington, DC 20503 or by fax to (202) 395-5806. Written comments should be received within 30 days of this notice.

Proposed Project

National Healthcare Safety Network (NHSN) (OMB No. 0920-0666, Exp. 12/31/2018) - Revision - National Center for Emerging and Zoonotic Infectious Diseases (NCEZID), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

The National Healthcare Safety Network (NHSN) is a system designed to accumulate, exchange, and integrate relevant information and resources among private and public stakeholders to support local and national efforts to protect patients and promote healthcare safety. Specifically, the data is used to determine the magnitude of various healthcare-associated adverse events and trends in the rates of these events among patients and healthcare workers with similar risks. The data will be used detect changes in the epidemiology of adverse events resulting from new and current medical therapies and changing risks. The NHSN currently consists of five components: Patient Safety, Healthcare Personnel Safety, Biovigilance, Long-Term Care Facility (LTCF), and Dialysis. The Outpatient Procedure Component is on track to be released in NHSN in 2017/2018. The development of this component has been previously delayed to obtain additional user feedback and support from outside partners.

Changes were made to six facility surveys and two new facility surveys were added. Based on user feedback and internal reviews of the annual facility surveys it was determined that questions and response options be amended, removed, or added to fit the evolving uses of the annual facility surveys. The surveys are being increasingly used to help intelligently

interpret the other data elements reported into NHSN. Currently the surveys are used to appropriately risk adjust the numerator and denominator data entered into NHSN while also guiding decisions on future division priorities for prevention.

Further, three new forms were added to expand NHSN surveillance to pediatric ventilator-associated events, adult sepsis, and custom HAI event surveillance. An additional 14 forms were added to the Hemovigilance Component to streamline data collection/entry for adverse reaction events.

Additionally, minor revisions have been made to 22 forms within the package to clarify and/or update surveillance definitions. The previously approved NHSN package included 52 individual collection forms; the current revision request adds nineteen forms and removes one form for a total of 70 forms. The reporting burden will increase by 489,174 hours, for a total of 5,110,716 hours.

Estimated Annualized Burden Hours

Type of	Form Name	No. of	No. of	Avg.
Respondents		Respondents	Responses	Burden
			per	per
			Respondent	Response
				(in
				hrs.)
Registered Nurse	57.100 NHSN	2,000	1	5/60

nfection eventionist)	Registration Form			
gistered Nurse	57.101 Facility	2,000	1	10/60
nfection	Contact			·
eventionist)	Information			
gistered Nurse	57.103 Patient	5,000	1	55/60
nfection	Safety			
eventionist)	Component			
	Annual Hospital			
	Survey			
gistered Nurse	57.105 Group	1,000	1	5/60
nfection	Contact	,		
eventionist)	Information			
gistered Nurse	57.106 Patient	6,000	12	15/60
nfection	Safety Monthly			
eventionist)	Reporting Plan			
gistered Nurse	57.108 Primary	6,000	44	30/60
nfection	Bloodstream			
eventionist)	Infection (BSI)			
gistered Nurse	57.111 Pneumonia	6,000	72	30/60
	(
	57.112	6,000	144	25/60
	Associated Event			
	57.113 Pediatric	2,000	120	25/60
	Ventilator-	,		
eventionist)	Associated Event			
	(PedVAE)			
gistered Nurse	57.114 Urinary	6,000	40	20/60
nfection	Tract Infection			
eventionist)	(UTI)			
gistered Nurse	57.115 Custom	2,000	91	35/60
nfection	Event			
eventionist)				
aff RN	57.116	6,000	9	3
	Denominators for			
	Neonatal			
	Intensive Care			
	Unit (NICU)			
aff RN	57.117	6,000	9	5
	Denominators for			
	Specialty Care			
	Area			
	(SCA)/Oncology			
	(ONC)			
aff RN	57.118	6,000	60	5
	Denominators for			
	Intensive Care			
	Unit (ICU)/Other			
	locations (not			
nfection eventionist) gistered Nurse nfection eventionist) aff RN	(PNEU) 57.112 Ventilator- Associated Event 57.113 Pediatric Ventilator- Associated Event (PedVAE) 57.114 Urinary Tract Infection (UTI) 57.115 Custom Event 57.116 Denominators for Neonatal Intensive Care Unit (NICU) 57.117 Denominators for Specialty Care Area (SCA) /Oncology (ONC) 57.118 Denominators for Intensive Care Unit (ICU) /Other	6,000 2,000 6,000 6,000	144 120 40 91 9	25/60 25/60 20/60 35/60 3

	NICU or SCA)			
Registered Nurse	57.120 Surgical	6,000	36	35/60
(Infection	Site Infection			
Preventionist)	(SSI)			
Staff RN	57.121	6,000	540	10/60
	Denominator for			
	Procedure			
Laboratory	57.123	6,000	12	5/60
Technician	Antimicrobial			
	Use and			
	Resistance			
	(AUR) -			
	Microbiology			
	Data Electronic			
	Upload			
	Specification			
	Tables			
Pharmacist	57.124	6,000	12	5/60
	Antimicrobial			
	Use and			
	Resistance			
	(AUR)-Pharmacy			
	Data Electronic			
	Upload			
	Specification			
	Tables			
Registered Nurse	57.125 Central	1,000	100	25/60
(Infection	Line Insertion			
Preventionist)	Practices			
	Adherence			
	Monitoring			
Registered Nurse	57.126 MDRO or	6,000	72	30/60
(Infection	CDI Infection			
Preventionist)	Form			
Registered Nurse	57.127 MDRO and	6,000	24	15/60
(Infection	CDI Prevention			
Preventionist)	Process and			
	Outcome Measures			
	Monthly			
	Monitoring			
Registered Nurse	57.128	6,000	240	20/60
(Infection	Laboratory-			
Preventionist)	identified MDRO			
	or CDI Event			1 - 1 - 1
Registered Nurse	57.129 Adult	50	250	25/60
(Infection	Sepsis			
Preventionist)				
Registered Nurse	57.137 Long-Term	350	1	1.08
(Infection	Care Facility			
Preventionist)	Component -			
	Annual Facility			

	Survey			
Registered Nurse	57.138	350	12	15/60
(Infection	Laboratory-			
Preventionist)	identified MDRO			
,	or CDI Event for			
	LTCF			
Registered Nurse	57.139 MDRO and	350	12	10/60
(Infection	CDI Prevention			
Preventionist)	Process Measures			
	Monthly			
	Monitoring for			
	LTCF			
Registered Nurse	57.140 Urinary	350	14	30/60
(Infection	Tract Infection			
Preventionist)	(UTI) for LTCF			
Registered Nurse	57.141 Monthly	350	12	5/60
(Infection	Reporting Plan			
Preventionist)	for LTCF			
Registered Nurse	57.142	350	12	3.35
(Infection	Denominators for			
Preventionist)	LTCF Locations			
Registered Nurse	57.143	300	12	5/60
(Infection	Prevention			
Preventionist)	Process Measures			
	Monthly			
	Monitoring for			
T 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	LTCF	4.0.0	1	55/60
Registered Nurse	57.150 LTAC	400	1	55/60
(Infection	Annual Survey			
Preventionist)	F7 1 F1 D-1-1-	1 000	1	FF / CO
Registered Nurse (Infection	57.151 Rehab	1,000	1	55/60
(Infection Preventionist)	Annual Survey			
	57.200	50	1	8
Occupational Health	Healthcare	30	1	0
RN/Specialist	Personnel Safety			
NN/ Specialist	Component Annual			
	Facility Survey			
Occupational	57.203	17,000	1	5/60
Health	Healthcare	1,,000		3,00
RN/Specialist	Personnel Safety			
111, OPCOLULIDO	Monthly			
	Reporting Plan			
Occupational	57.204	50	200	20/60
Health	Healthcare			
RN/Specialist	Worker			
	Demographic Data			
Occupational	57.205 Exposure	50	50	1
Health	to Blood/Body			
RN/Specialist	Fluids			

	I	<u> </u>	1	
Health	Healthcare			
RN/Specialist	Worker			
	Prophylaxis/Trea			
	tment			
Laboratory	57.207 Follow-Up	50	50	15/60
Technician	Laboratory			
	Testing			
Occupational	57.210	50	50	10/60
Health	Healthcare			
RN/Specialist	Worker			
-	Prophylaxis/Trea			
	tment-Influenza			
Medical/Clinical	57.300	500	1	2
Laboratory	Hemovigilance			
Technologist	Module Annual			
100::::010	Survey			
Medical/Clinical	57.301	500	12	1/60
Laboratory	Hemovigilance			1,00
Technologist	Module Monthly			
lecimorogist	Reporting Plan			
Medical/Clinical	57.303	500	12	1.17
Laboratory	Hemovigilance	300	12	1.1/
Technologist	_			
lechnologist	Module Monthly			
	Reporting			
26 11 7 /07 1	Denominators	500	1.0	10/60
Medical/Clinical	57.305	500	10	10/60
Laboratory	Hemovigilance			
Technologist	Incident			
Medical/Clinical	57.306	200	1	35/60
Laboratory	Hemovigilance			
Technologist	Module Annual			
	Survey - Non-			
	acute care			
	facility			
Medical/Clinical	57.307	500	4	25/60
Laboratory	Hemovigilance			
Technologist	Adverse Reaction			
	- Acute			
	Hemolytic			
	Transfusion			
	Reaction			
Medical/Clinical	57.308	500	4	25/60
Laboratory	Hemovigilance			
Technologist	Adverse Reaction			
-	- Allergic			
	Transfusion			
	Reaction			
Medical/Clinical	57.309	500	1	25/60
Laboratory	Hemovigilance			
Technologist	Adverse Reaction			
J	- Delayed			
	2014104	_1		I

	Hemolytic			
	Transfusion			
M - 11 - 1 / 0 1 1 - 1 - 1	Reaction	F00		25/60
Medical/Clinical	57.310	500	2	25/60
Laboratory	Hemovigilance			
Technologist	Adverse Reaction			
	- Delayed			
	Serologic			
	Transfusion			
	Reaction			
Medical/Clinical	57.311	500	4	25/60
Laboratory	Hemovigilance			
Technologist	Adverse Reaction			
	- Febrile Non-			
	hemolytic			
	Transfusion			
	Reaction			
Medical/Clinical	57.312	500	1	25/60
Laboratory	Hemovigilance			
Technologist	Adverse Reaction			
	- Hypotensive			
	Transfusion			
	Reaction			
Medical/Clinical	57.313	500	1	25/60
Laboratory	Hemovigilance			
Technologist	Adverse Reaction			
	- Infection			
Medical/Clinical	57.314	500	1	25/60
Laboratory	Hemovigilance			
Technologist	Adverse Reaction			
	- Post			
	Transfusion			
	Purpura			
Medical/Clinical	57.315	500	1	25/60
Laboratory	Hemovigilance			,
Technologist	Adverse Reaction			
	- Transfusion			
	Associated			
	Dyspnea			
Medical/Clinical	57.316	500	1	25/60
Laboratory	Hemovigilance			20,00
Technologist	Adverse Reaction			
TOCIMIOTOGISC	- Transfusion			
	Associated Graft			
	vs. Host Disease			
Medical/Clinical	57.317	500	1	25/60
Laboratory	Hemovigilance	300		23/00
_	Adverse Reaction			
Technologist	- Transfusion			
	Related Acute			
	Lung Injury			

Medical/Clinical	57.318	500	2	25/60
Laboratory	Hemovigilance	300	2	23700
Technologist	Adverse Reaction			
1 CCIIIIOIOGISC	- Transfusion			
	Associated			
	Circulatory			
	Overload			
Medical/Clinical	57.319	500	1	25/60
Laboratory	Hemovigilance	300		23700
Technologist	Adverse Reaction			
l	- Unknown			
	Transfusion			
	Reaction			
Medical/Clinical	57.320	500	1	25/60
Laboratory	Hemovigilance	300		23700
Technologist	Adverse Reaction			
	- Other			
	Transfusion			
	Reaction			
Medical/Clinical	57.400 Patient	5,000	1	5/60
Laboratory	Safety	3,000		37 00
Technologist	Component-Annual			
	Facility Survey			
	for Ambulatory			
	Surgery Center			
	(ASC)			
Staff RN	57.401	5,000	12	15/60
	Outpatient	,		·
	Procedure			
	Component -			
	Monthly			
	Reporting Plan			
Staff RN	57.402	5,000	25	40/60
	Outpatient			
	Procedure			
	Component Event			
Staff RN	57.403	5,000	12	40/60
	Outpatient			
	Procedure			
	Component -			
	Monthly			
	Denominators and			
	Summary			
Staff RN	57.500	6,500	1	2.0
	Outpatient			
	Dialysis Center			
	Practices Survey			
Registered Nurse	57.501 Dialysis	6,500	12	5/60
(Infection	Monthly			
Preventionist)	Reporting Plan			
Staff RN	57.502 Dialysis	6,500	60	25/60

	Event			
Staff RN	57.503 Denominator for Outpatient	6,500	12	10/60
Staff RN	Dialysis 57.504 Prevention Process Measures Monthly Monitoring for Dialysis	1,500	12	1.25
Staff RN	57.505 Dialysis Patient Influenza Vaccination	325	75	10/60
Staff RN	57.506 Dialysis Patient Influenza Vaccination Denominator	325	5	10/60
Staff RN	57.507 Home Dialysis Center Practices Survey	600	1	25/60

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